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## LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name Akin, Gump, Strauss, Hauer & Feld, L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 1333 New Hampshire Avenue, NW			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20036			
4. Contact Name Bill Paxon	Telephone 202-887-4000	E-mail (optional)	5. Senate ID 682-1
7. Client Name <input type="checkbox"/> Self New York State Health Facilities Association			6. House ID 31784

**TYPE OF REPORT** 8. Year 2002 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇒ Termination Date \_\_\_\_\_

11. No Lobby:

### INCOME OR EXPENSES – Complete Either Line 12 OR Line 13

**12. Lobbying Firms**  
**INCOME** relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more  ⇒ \$ 60,000  
Income (nearest \$20,000)

Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).

**13. Organizations**  
**EXPENSES** relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more  ⇒ \$ \_\_\_\_\_  
Expenses (nearest \$20,000)

**14. REPORTING METHOD.** Check box to indicate accounting method. See instructions for description of method.

**Method A.** Reporting amounts using LDA definition

**Method B.** Reporting amounts under section 6013(e) Internal Revenue Code

**Method C.** Reporting amounts under section 162(e) Internal Revenue Code

Signature \_\_\_\_\_ Date August 14, 2002

Printed Name and Title Bill Paxon, Senior Advisor



Registrant Name Akin, Gump, Strauss, Hauer & Feld, L.L.P. Client Name New York State Health Facilities Assc

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code** information as requested. Attach additional page(s) as needed.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

Medicare regulatory issues

17. House(s) of Congress and Federal Agencies contacted

Check if None

- U.S. House of Representatives
- U.S. Senate
- Centers for Medicare and Medicaid Services

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Karen Goldmeier Green	
Bill Paxon	
Paul G. Scolese	
Barney J. Skladany	
.....	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature \_\_\_\_\_ Date August 14, 2007

Printed Name and Title Bill Paxon, Senior Advisor



Registrant Name Akin, Gump, Strauss, Hauer & Feld, L.L.P. Client Name New York State Health Facilities Assc

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code** information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues  
Health care worker shortage

17. House(s) of Congress and Federal Agencies contacted  Check if None  
U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Karen Goldmeier Green	
Bill Paxon	
Paul G. Scolese	
Barney J. Skladany	

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature  Date August 14, 2007

Printed Name and Title Bill Paxon, Senior Advisor

